

COVID-19 (Coronavirus Disease)

CASES ARE RISING.
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Interim SARS-CoV-2 Testing Guidelines for Patients in Outpatient Hemodialysis Facilities

Testing Guidelines for Outpatient Dialysis Facilities

Updated Dec. 17, 2020 [Print](#)

Summary of Recent Changes

Updates as of Dec 16, 2020 

December 16, 2020

- Added language about [timing and frequency](#) with which to perform SARS-CoV-2 testing on asymptomatic individuals who have had prolonged close contact with someone with SARS-CoV-2 infection.
- Added link to FAQ addressing when options to reduce quarantine for contacts of persons with SARS-CoV-2 infection might be considered in healthcare settings.

Testing patients with signs or symptoms of COVID-19

- Testing asymptomatic patients with known or suspected exposure to an individual infected with SARS-CoV-2, including close and expanded contacts (e.g., there is an outbreak in the facility) to control transmission
 - Every time a patient presents to the facility [assess for any recent exposure to others with SARS-CoV-2](#) infection.
 - Patients undergoing outpatient dialysis might have exposures to individuals with SARS-CoV-2 infection inside and outside of the dialysis facility. It is important that patients are screened for any potential

exposures each time they undergo treatment so IPC measures can be promptly implemented and testing can be performed in an expeditious manner to prevent transmission to other patients or HCP.

- Because of the potential for asymptomatic and pre-symptomatic transmission of SARS-CoV-2 infection to other vulnerable individuals and HCP in the dialysis facility, it is important that dialysis patients that have been [close contacts](#) of individuals with SARS-CoV-2 infection be quickly identified and tested for SARS-CoV-2 infection. Testing should be considered immediately after identification as a contact, and if negative, again about 5-7 days after last exposure or immediately if symptoms develop during quarantine.
 - Facilities should maintain at least 6 feet of separation between patients who had close contact with a person with SARS-CoV-2 infection and other patients during dialysis treatment; they should not be cohorted with each other or with patients with confirmed or suspected SARS-CoV-2 infection. HCP caring for patients who were close contacts of patients with SARS-CoV-2 infection should use all recommended personal protective equipment (PPE) for the care of patients with SARS-CoV-2 infection.
 - Because patients can develop SARS-CoV-2 infection at any point during their 14-day exposure period, such safeguards should remain in place for 14 days after the exposure event, even if viral testing of the exposed patient is negative during this time period. Options to shorten quarantine are discussed [here](#).
 - If the exposed patient is within 90 days of being diagnosed with confirmed SARS-CoV-2 infection, has completed their recommended duration of isolation precautions, and is currently asymptomatic, they do not need to be tested or managed with Transmission-Based Precautions. [However, if these individuals develop new symptoms consistent with COVID-19 they should be placed on Transmission-Based Precautions, assessed, and potentially tested for SARS-CoV-2 if an alternate etiology is not identified.](#)
 - Follow local regulations regarding reporting newly identified infections to public health authorities.

Last Updated Dec. 17, 2020

Content source: [National Center for Immunization and Respiratory Diseases \(NCIRD\), Division of Viral Diseases](#)